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CONFIRMATION NO. 2436

<b>SERIAL NUMBER</b> 10/827,185	<b>FILING DATE</b> 04/19/2004  <b>RULE</b>	<b>CLASS</b> 524	<b>GROUP ART UNIT</b> 1713	<b>ATTORNEY DOCKET NO.</b> COS-889															
<b>APPLICANTS</b>  Mike Musgrave, Houston, TX;  LuAnn Kelly, Friendswood, TX; Mark Murphy, Baytown, TX; John Ashbaugh, Houston, TX;																			
<b>** CONTINUING DATA *****</b> <i>not</i>																			
<b>** FOREIGN APPLICATIONS *****</b> <i>not</i>																			
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/28/2004</b>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">           Foreign Priority claimed  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no         </td> <td style="width: 15%;">           STATE OR COUNTRY TX         </td> <td style="width: 15%;">           SHEETS DRAWING 0         </td> <td style="width: 15%;">           TOTAL CLAIMS 30         </td> <td style="width: 15%;">           INDEPENDENT CLAIMS 4         </td> </tr> <tr> <td>           35 USC 119 (a-d) conditions met  <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance         </td> <td colspan="4"></td> </tr> <tr> <td>           Verified and Acknowledged            Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i> </td> <td colspan="4"></td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 0	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance					Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				
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<b>ADDRESS</b> David J. Alexander Fina Technology, Inc. P.O. Box 674412 Houston, TX 77267-4412																			
<b>TITLE</b> Random copolymer-impact copolymer blend																			
<b>FILING FEE RECEIVED</b> 1036	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees ( Filing )</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees ( Issue )</td> </tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )											
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